

State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditures

RECEIVED

OCT 15 2004

S.D. SEC. OF STATE

Candidates and candidate committees: File in the office where you filed your nominating petition.

PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,
500 E Capitol Ave., Pierre, SD 57501-5070

See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.

Name of Candidate or Committee Hutchinson County RepublicansComplete Mailing Address 27840 437th Ave Freeman, S.D 57029Name of Person Making Report Herb Koerner Jr Daytime Phone Number 605-925-7558
605-925-4781

If you are a candidate, what office are you seeking? _____

If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.

_____Type of Report (See pages 4 & 5 of Guideline Book) County

For Reporting Period Ending (See pages 4 & 5 of Guideline Book) _____

The following verification must be completed before submitting report.

VERIFICATION OF PERSON MAKING REPORT

I Herbert Koerner Jr (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.Date: 10-10-04
Herbert Koerner Jr
 Candidate Signature or
 Signature of Committee Treasurer or Chairperson

Revised July 2001

 Filed this 20th day of
October 2004
Chi Nelson
 SECRETARY OF STATE

For the reporting period ending _____

1

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*\$

**Place of Employment
(Name of Employer)**

Total of Itemized Contributions from Individuals:

*\$

\$ _____

Name of Candidate or Committee: _____

For the reporting period ending: _____

Schedule B - Fund-Raising Events Proceeds

List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.

| Type or Name of Event | Net Proceeds |
|-----------------------|--------------|
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| | |

Total: _____

Schedule C - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported.

| Nature of Non-Cash Contribution | Name, Residence Address & Place of Employment | Estimated Value |
|---------------------------------|--|-----------------|
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| | | |
| | | |

Total: _____

Schedule D - Other Income

Use this schedule to report any refunds, interest earned or other income which is not a direct contribution.

| Source of Income | Amount |
|------------------|--------|
| | |
| | |
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| | |
| | |

Total: _____

Schedule F - Debts and Obligations

[illegible]

Total Obligations: _____

Name of Candidate or Committee: Hutchinson County

For the reporting period ending: _____

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

1. Amount on hand, if any, at the beginning of the reporting period: \$ 243.05
2. Receipts

| | | |
|------------------------------------|----|--|
| Schedule A - Direct Contributions | \$ | |
| Schedule B - Fund-Raising Events | \$ | |
| Schedule C - In Kind Contributions | \$ | |
| Schedule D - Other Income | \$ | |
| Total of all Receipts | \$ | |
3. Total Monetary Receipts (A+B+D) \$ _____
4. Candidate's Personal Contribution to Own Campaign \$ _____
5. Monetary Loans to Candidate or Committee During Reporting Period \$ _____
6. Monetary Loans Repaid During Reporting Period \$ _____
7. Expenditures - Schedule E \$ 40.00
8. Unpaid Obligations - Schedule F \$ _____
9. Amount on hand at the close of this reporting period. *
This should equal lines (1+3+4+5) - (6+7) \$ 203.05

